Hospital Profile: MARTHA'S VINEYARD HOSPITAL

Martha's Vineyard Hospital is a non-profit, acute care community hospital. It is among the smallest hospitals in Massachusetts, with 25 staffed beds. Martha's Vineyard Hospital is located in the Cape and Islands region and represents 6% of all acute hospital staffed beds in the region. It was designated as a Critical Access Hospital (CAH) in 2012. It is a member of the Partners HealthCare system.

PATIENTS Seventy-two percent of all inpatient cases treated at Martha's Vineyard Hospital are from Vineyard Haven, Edgartown, and Oak Bluffs.

INPATIENT SERVICES Compared with the other community hospitals, Martha's Vineyard Hospital treats the greatest proportion of lower-severity cases. In FY12, it accounted for 5% of all inpatient discharges from acute hospitals within the Cape and Islands region. Of note, based on its most common FY12 inpatient cases (DRGs), Martha's Vineyard Hospital treated 51% of all Rehabilitation cases and 26% of all Other Musculoskeletal System & Connective Tissue Diagnoses cases in the Cape and Islands region.

FINANCIAL PERFORMANCE Martha's Vineyard Hospital's total revenue in FY12 was \$60 million. Its FY12 public payer mix was 61%, the third highest of all community hospitals. Martha's Vineyard Hospital's FY12 inpatient cost[‡] per case mix adjusted discharge was \$19,390, approximately 90% higher than the average community hospital and the second highest among all community hospitals. Martha's Vineyard Hospital's CY12 average commercial payer price level was at the 86th percentile, the highest among all community hospitals. It earned a surplus of \$102,530 in FY12, which contributed to its lowest total margin (0.2%) from FY08 to FY12. It earned a surplus each year in this period.

AT A GLANCE

TOTAL STAFFED BEDS: 25, among the smallest acute hospitals

% OCCUPANCY: 59%, < cohort avg. (62%)

TOTAL REVENUE in FY12: \$60 million

PUBLIC PAYER MIX: 61% (Non-DSH* Hospital)

SPECIAL PUBLIC FUNDING: ICB[®]

TAX STATUS: Non-profit

TRAUMA CENTER DESIGNATION: Not Applicable

CY12 COMMERICIAL PAYER PRICE LEVEL: 86th Percentile

CASE MIX INDEX in FY12: 0.63, < cohort avg. (0.81); < statewide (1.06)

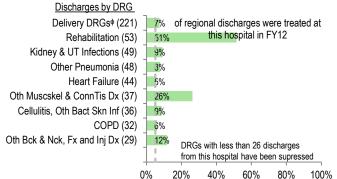
INPATIENT: OUTPATIENT REVENUE in FY12: 16%:84%

TOTAL MARGIN in FY12: 0.2% (\$0.1 million)

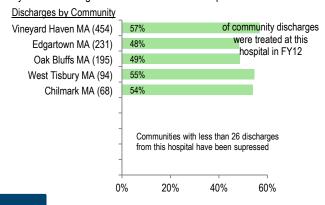
CHANGE in OWNERSHIP (FY08-FY12): Not Applicable

SERVICES

What were the most common inpatient cases (DRGs) treated at the hospital? What proportion of the region's cases did this hospital treat for each service?



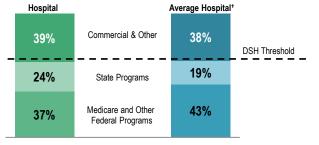
Where did most of the hospital's inpatients reside? What proportion of each community's total discharges were attributed to this hospital?



- - Hospital (1,214) = 5% of total regional discharges

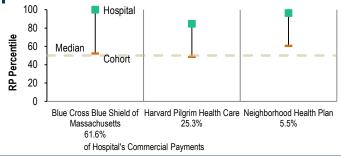
PAYER MIX

What was the hospital's overall payer mix (gross charges) in FY12, and how does this hospital compare to the average acute hospital's payer mix?



Percentage calculations may not sum to 100% due to rounding

What were the hospital's CY12 payer-specific relative price levels for its top three commercial payers? How does this hospital compare to the average hospital in its peer cohort?



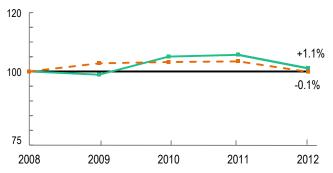
For descriptions of the metrics, please see Technical Appendix.

Cohort: Community Hospital

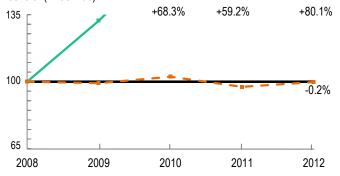
UTILIZATION TRENDS

Hospital Peer Cohort

How has the volume of the hospital's inpatient discharges changed compared to FY08, and how does this hospital compare to the average hospital in its peer cohort? (FY08=100)

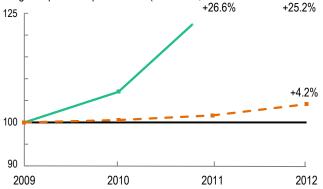


How has the volume of the hospital's outpatient visits changed compared to FY08, and how does this hospital compare to the average hospital in its peer cohort? (FY08=100)

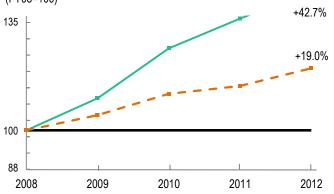


COST TRENDS

How has the hospital's inpatient cost[‡] per case mix adjusted discharge changed compared to FY09, and how does this hospital compare to the average hospital in its peer cohort? (FY09=100)



How have the hospital's total outpatient costs changed compared to FY08, and how does this hospital compare to the average hospital in its peer cohort? (FY08=100)

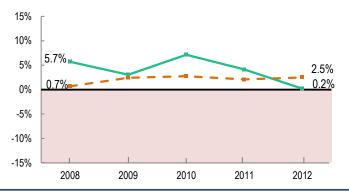


FINANCIAL PERFORMANCE

How have the hospital's total revenue and costs changed between FY08 and FY12?

Revenue, Cost & Profit/Loss (in millions)					
FY	Total Revenue	% Change	Total Cost	% Change	Total Profit/Loss
2008	\$47		\$44		\$2.6
2009	\$49	5.7%	\$48	8.7%	\$1.5
2010	\$55	11.2%	\$51	6.5%	\$3.9
2011	\$58	6.2%	\$56	9.7%	\$2.4
2012	\$60	2.8%	\$60	7.1%	\$0.1

What was the hospital's total margin between FY08 and FY12, and how does this compare to the median of its peer cohort hospitals?



For descriptions of the metrics, please see Technical Appendix.

- [‡] Costs were adjusted to exclude direct medical education costs and physician compensation.
- * Disproportionate Share Hospitals (DSH) receive a minimum of 63% of gross patient service revenue from public payers.
- $^{\rm \theta}\,\text{For more}$ information on Infrastructure and Capacity Building (ICB) special funding, please contact the Massachusetts Executive Office of Health and Human Services (EOHHS).
- Delivery DRG includes Cesarean and Vaginal Deliveries, and Neonate DRG.

For more information, please contact:

CENTER FOR HEALTH INFORMATION AND ANALYSIS Two Boylston Street, 5th Floor Boston, MA 02116



www.mass.gov/chia/hospitals

[†] Average Hospital does not include Specialty hospitals.